

12/05/01

A

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: ABRAMS ET AL.
 Title: DETACHABLE COVERING FOR AN IMPLANTABLE MEDICAL DEVICE
 Docket No.: 99-0205C

Box PATENT APPLICATION
 Assistant Commissioner for Patents
 U.S. Patent and Trademark Office
 Washington, D.C. 20231

Sir:

We are transmitting herewith the attached:

- ☒ Transmittal Sheet in duplicate containing Certificate under 37 CFR § 1.10.
☒ Request for Continuation Application Under 37 CFR § 1.53(b) with copy of prior application as filed in U.S. Serial No. 09/459,143, filed December 19, 1999, consisting of: Specification (8 pgs. including 15 claims); Abstract (1 pg.); and 3 sheets of drawings; Declaration and Power of Attorney as filed in U.S. Serial No. 09/459,143.
☒ A return postcard.
☒ **PLEASE CHARGE DEPOSIT ACCOUNT NO. 19-0765 for the required filing fee of \$740.00.**

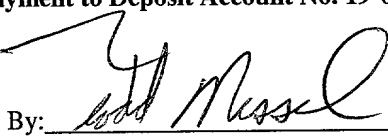
The Filing Fee has been calculated below as follows:

CLAIMS AS FILED

	No. Filed		No. Extra	Rate	Fee Total
Total Claims:	15	- 20 =	0	x \$18 =	\$0
Independent Claims:	3	- 3 =	0	x \$84 =	\$0
Multiple Dependent Claim Presented:				+ \$260=	\$
Basic Fee:					\$ 740
TOTAL:					\$ 740

Please charge any additional required fees or credit overpayment to Deposit Account No. 19-0765. A duplicate copy of this sheet is enclosed.

Scimed Life Systems, Inc.
 One Scimed Place, Maple Grove, MN 55311-1566
 (763) 494-2880

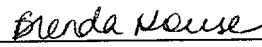
By: 
 Name: Todd P. Messal
 Reg. No.: 42,883

CERTIFICATE UNDER 37 C.F.R. § 1.10:

"Express Mail" mailing label number: EL056549990US

Date of Deposit: November 14, 2001

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated above and is addressed to: BOX PATENT APPLICATION, Assistant Commissioner for Patents, Washington, D.C. 20231.

By: 
 Name: Brenda House

10/001538
 11/14/01

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: ABRAMS

Examiner: Unassigned
(in Parent App.: J. Woo)

Serial No. : Unassigned
(in Parent App.: 09/459,143)

Art Unit: Unassigned
(in Parent App.: 3731)

Filed: Concurrently herewith
(in Parent App.: 12/10/1999)

Docket: 99-0205C

Title: DETACHABLE COVERING FOR AN IMPLANTABLE MEDICAL DEVICE

REQUEST FOR CONTINUATION
APPLICATION UNDER 37 C.F.R. § 1.53(b)

Box PATENT APPLICATION
Assistant Commissioner for Patents
U.S. Patent and Trademark Office
Washington, D.C. 20231

Dear Sir:

This is a request for filing a continuation application under 37 C.F.R. § 1.53(b) of prior application Serial No. 09/459,143, filed on December 10, 1999, entitled DETACHABLE COVERING FOR AN IMPLANTABLE MEDICAL DEVICE, with the following inventor(s):

1	Full Name of Inventor	Family Name ABRAMS	First Given Name ROBERT	Second Given Name M.
	Residence & Citizenship	City ENCINITAS	State or Foreign Country CALIFORNIA	Country of Citizenship USA
	Post Office Address	Post Office Address 450 SANDALWOOD COURT	City ENCINITAS	State & Zip Code/Country CALIFORNIA 92024/USA
2	Full Name of Inventor	Family Name	First Given Name	Second Given Name
	Residence & Citizenship	City	State or Foreign Country	Country of Citizenship
	Post Office Address	Post Office Address	City	State & Zip Code/Country
3	Full Name of Inventor	Family Name	First Given Name	Second Given Name
	Residence & Citizenship	City	State or Foreign Country	Country of Citizenship
	Post Office Address	Post Office Address	City	State & Zip Code/Country

☒ A copy of the prior application as filed is enclosed including a copy of the oath or declaration filed in the parent application.

The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

The filing fee is calculated on the basis of the claims existing in the prior application including any amendment referred to herein.

CLAIMS AS FILED

	No. Filed		No. Extra	Rate	Fee Total
Total Claims:	15	- 20 =	0	x \$18 =	\$ 0
Independent Claims:	3	- 3 =	0	x \$84 =	\$ 0
Basic Fee:					\$740
TOTAL:					\$740

☒ Please charge Deposit Account No. 19-0765 for the filing fee of \$740.00.

The Commissioner is hereby authorized to charge any additional fees as set forth in 37 C.F.R. § 1.16 to § 1.18 or 37 C.F.R. § 1.15(b)(1) which may be required to Deposit Account No. 19-0765.

☒ Amend the specification by inserting before the first line the sentence, "This is a continuation of application Serial No. 09/459,143, filed December 10, 1999."

☒ The prior application is assigned of record to Scimed Life Systems, Inc. as recorded at Reel 010471, Frame 0718.

☒ The Power of Attorney in the prior application is to:

Luke Dohmen, Reg. No. 36,783

Peter J. Gafner, Reg. No. 36,517

Todd P. Messal, Reg. No. 42,883

Robert M. Rauker, Reg. No. 40,782


☒ Address all future communications to:

Todd P. Messal, at the address listed below.

The undersigned declares further that all statements made herein of his own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that willful false statements so made may jeopardize the validity of the application or any patent issuing therefrom.

Respectfully submitted,

Date: November 13, 2001



Todd P. Messal, Reg. No. 42,883
Scimed Life Systems, Inc.
One Scimed Place, M.S. A150
Maple Grove, MN 55311-1566
Telephone: (612) 494-2880

CERTIFICATE UNDER 37 C.F.R. § 1.10:

"Express Mail" mailing label number: EL056549990US

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By: Brenda House
Name: Brenda House